

UNDERGRADUATE INTERNSHIP APPLICATION/CONTRACT

To register for an internship, you must complete this form and have it approved and signed by the Faculty Member who will be supervising your work. It is suggested that you interview with at least two different organizations. Bring the completed form to **205 Center for the Arts** to be registered into this course. **One credit hour requires 40 hours of work time.**

NAME _____ SIGNATURE _____
(please print)

PERSON #: _____ UB EMAIL: _____

COURSE TITLE: _____

COURSE REGISTRATION #: _____ CREDITS: _____

FACULTY SPONSOR: _____

INTERNSHIP LOCATION, NAME/ADDRESS/TELEPHONE/E-MAIL OF ORGANIZATION:

(please print)

In the space below state:

Duties: _____

Responsibilities: _____

Hours which were agreed upon in your interview: _____

Indicate what you plan to learn and accomplish through this internship (continue on reverse if necessary)

Faculty Sponsor _____ Date _____
(signature)

Organization Representative _____ Date _____
(please print)

(signature)